

Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 180)

### Complete if Known

Application Number	09/921,285
Filing Date	August 1, 2001
First Named Inventor	Cerami, Richard
Examiner Name	Unassigned
Art Unit	5324
Attorney Docket No.	020366-077310US

### METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity		Small Entity		Small Entity		
	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

#### 2. EXCESS CLAIM FEES

Fee Description	Small Entity	
	Fee (\$)	Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims      Extra Claims      Fee (\$)      Fee Paid (\$)      Multiple Dependent Claims

\_\_\_\_\_ -20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_      Fee (\$)      Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20

Indep. Claims      Extra Claims      Fee (\$)      Fee Paid (\$)

\_\_\_\_\_ -3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets      Extra Sheets      Number of each additional 50 or fraction thereof      Fee (\$)      Fee Paid (\$)

\_\_\_\_\_ - 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Submission of Information Disclosure Stmt

Fees Paid (\$)

180

#### SUBMITTED BY

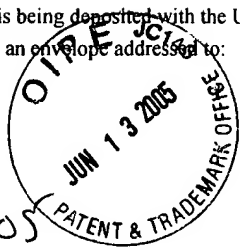
Signature		Registration No. (Attorney/Agent)	48,602	Telephone	415-576-0200
Name (Print/Type)	Brian N. Young			Date	6/8/05

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

On

June 8, 2005



PATENT  
Attorney Docket No.: 020366-077310US  
Client Reference No.: 1773

TOWNSEND and TOWNSEND and CREW LLP

By:

Julie Taylor Clague

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

CERAMI et al.

Application No.: 09/921,285

Filed: August 1, 2001

For: PROVISIONING SYSTEM AND  
METHOD FOR AUTO-DISCOVERING  
CUSTOMER PREMISES EQUIPMENT  
IN ACTIVATING XDSL

Examiner: Shawki S. Ismail

Art Unit: 5324

SUPPLEMENTAL INFORMATION  
DISCLOSURE STATEMENT UNDER 37  
CFR §1.97 and §1.98

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A are being called to the attention of the Examiner. In accordance with the USPTO waiver of the requirement under 37 CFR 1.98 (a)(2)(i) for submitting a copy of each cited U.S. patent and each U.S. patent application publication for all U.S. patent applications, applicant has not submitted copies of the U.S. references. It is respectfully requested that the cited references be expressly considered

during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

This IDS is being filed before the mailing date of the final Office Action or Notice of Allowance.

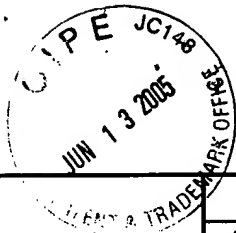
Please charge the IDS fee of \$180 to Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Brian N. Young  
Reg. No. 48,602

TOWNSEND and TOWNSEND and CREW LLP  
Two Embarcadero Center, Eighth Floor  
San Francisco, California 94111-3834  
Tel: 415-576-0200  
Fax: 415-576-0300  
BNY:mtd



Substitute for form 1449A&amp;B/PTO

**INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT***(use as many sheets as necessary)***Complete if Known**

Application Number	09/921,285
Filing Date	August 1, 2001
First Named Inventor	Cerami, Richard
Art Unit	5324
Examiner Name	Shawki S. Ismail
Attorney Docket Number	020366-077310US

Sheet 1 of 1

**U.S. PATENT DOCUMENTS+**

Examiner Initials*	Cite No. <sup>1</sup>	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code <sup>2</sup> (if known)			
	AA	US 5,650,994	07-1997	Daley	
	AB	US-6,765,873	07-2004	Fichou et al.	
	AC	US-6,775,303	08-2004	Rustad et al.	
	AD	US-6,785,296	08-2004	Bell	

Examiner  
SignatureDate  
Considered

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.